

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY WITH INK. THIS IS A PERMANENT RECORD.  
 IN CASE OF TWIN OR TRIPLETS, USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN, NO. 1, THE OTHER, NO. 2, ETC., IN QUESTION 8.

RECORDS OF COLUMBIA, COLUMBIA, D. C.

(1) PLACE OF BIRTH

County of Columbia  
 Township of Indian  
 or  
 Inc. Town of .....  
 or  
 City of .....

CERTIFICATE OF BIRTH  
 STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

File No.—For State Registrar Only  
933

Registration District No. 1409 Registered No. 40  
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Wm. H. Presing

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan. 11, 1922  
 To be answered only in event of Twins or Triplets (State of Month) (Day) (Year)

FATHER.  
 (4) FULL NAME W. H. Presing  
 (9) PRESENT POSTOFFICE OF FATHER Hampton SC  
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 28 (Years)  
 (12) BIRTHPLACE SC  
 (13) OCCUPATION Saw-mill operation  
 (20) Number of children born to mother, including present birth 1

MOTHER.  
 (14) NAME BEFORE MARRIAGE Theresa C. Presing  
 (15) PRESENT POSTOFFICE OF MOTHER Hampton, SC  
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 21 (Years)  
 (18) BIRTHPLACE SC  
 (19) OCCUPATION Domestic  
 (21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born at Hampton on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Richard A. Presing  
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Hampton, SC

When name added from a supplemental report

(26) Witness John H. Miller  
 (27) Filed Jan 10 1922  
 (28) Signature of Witness necessary only when question 22 is signed by mark  
 (29) Local Registrar John H. Miller

When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

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